

☐ Original Report

Candidate's Residence Address (include number and street)

Name of Candidate Campaign Committee

### **Candidate Termination Statement**

☐ Amended Report – Report #

Daytime Phone Number (for person filling out this report)

CITY OF ALEXANDRIA

DEC 03 2015

VOTER REGISTRATION **ELECTORAL BOARD** 

Final Report
This document must be clear, legible and typed or printed in blue or black ink.

Committee ID # (if one)

ANU VA 22302	7033700094
City, State and Zip	E-mail Address
Termination Statemen	nt of Candidate/Treasurer
and ending	rying schedules, fully discloses all financial activities for that this committee is being disbanded and that this eported receipts and has disbursed all funds in accordance
$\frac{12\sqrt{3/15}}{\text{Date}}$	Signature of Treasurer or Candidate



### \* VIRGINIA \* DEPARTMENT of ELECTIONS

### Campaign Finance Report

### Candidate Committee

2015 Reporting Year

I declare, subject to the provisions of § 24.2-1016 which is punishable through	STATEMEN	<ul><li>JULY 15, 2015</li><li>JANUARY 19, 2016</li></ul>	☐ APRIL 15, 2015 ☐ APRIL 27, 2015 ☐ JUNE 15, 2015	MAY ELECTION  Candidates who will have activity pertaining to the 2015 May General Elections have reports due on the following dates:	RE	I declare, subject to the penalties of Vi subtraction of any bank service charges reporting cycle, any interest or dividend the next report for any period in which o with activity was:	Check here if this is an Amended Report Number  M. M. GOPF & S  NAME OF CANDIDAÇE COMMITTEE  13 3 5 5401 Und  MAILING ADDRESS (INCLUDE NUMBER AND STREET):  ALL CITY, STATE AND ZIP CODE
Treasurer or \$24.2-1016 which is punishable up to a Class 5 Felony, that this report for the period including all its accompanying schedules, is to the best of my knowledge and belief true, correct and complete.	L JANUARY 19, 2016	-		NOVEMBER ELECTION Candidates who have activity pertaining to the 2015 June Primaries and/or November General elections have reports due on the following dates:  APRIL 15, 2015	REPORT DATE [CHECK ONE SQUARE BELOW	NO ACTIVITY STATEMENT  I declare, subject to the penalties of Virginia's campaign finance law, that except for the addition of interest or dividend payments and/or subtraction of any bank service charges, no monies or other things of value have been received and no monies have been expended for this reporting cycle, any interest or dividend payments and/or subtraction of bank service charges will be reported on the appropriate schedule of the next report for any period in which other activity occurs. The balance, as indicated on Line 19 of Schedule H, for the last reporting period with activity was:  \$	Number:  School  22301
his report for the period  whedge and belief true, correct and complete.		PRE-ELECTION  POST ELECTION	JANUARY 19, 2016  SPECIAL FIFCTION	S chie	ow]	addition of interest or dividend payments and/or sived and no monies have been expended for this es will be reported on the appropriate schedule of ine 19 of Schedule H, for the last reporting period	Committee ID Number:    DXXXX

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-	ALEXANDRI
- marriage	NDRIA

DEC 03 2015

VOTER REGISTRATION ELECTORAL BOARD

M. M.: COPP Contributions over \$100

REPORTING PERIOD: 10/3-3 THROUGH: 11/3-40/15 PAGE: 0F: 1

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

REVISED MAY 1, 2014			SUPERSEDES ALL PREVIOUS VERSIONS	CFDA-945A
		TOTAL THIS PERIOD SE OF SCHEDULE A AND ON LINE 1 OF SCHEDULE G.]	TOTAL THIS PI FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN. [ENTER ON LAST PAGE OF SCHEDULE A. LINE 1 OF SCHED	FILER IS SUBJECT TO FINES IF ALI
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			3. PRINCIPAL PLACE OF BUSINESS 3. PRINCIPAL PLACE OF BUSINESS	
TO DATE	THIS PERIOD	RECEIVED	1. NOT REQUIRED  2 Type of Bligness	MAILING ADDRESS OF CONTRIBUTOR & ZIP
AGGREGATE	CONTRIBUTION	DATE	BUSINESS/CORPORATE DONOR	FULL NAME OF CONTRIBUTOR
COLUMN 5	COLUMN 4	COLUMN 3	COLUMN 2	COLUMN 1

SCHEDULE B: IN-KIND CONTRIBUTIONS OVER \$100

MUST BE TYPED OR PRINTED LEGIBLY IN SCHOOL BOOK TO THE TOTAL COMMITTEE OR POLITICAL COMMITTEE

REPORTING PERIOD: 10 2 THROUGH: 11 ) all PAGE: \_ |\_ | |

CFDA-945B FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN [LIST IN ALPHABETICAL ORDER] FULL NAME OF CONTRIBUTOR
MAILING ADDRESS OF CONTRIBUTOR & ZIP COLUMN I 3.223 このととのでき 4 SERVICE/GOODS RELEATED

5 BASIS USED TO DETERMINE VALUE

Å EMPLOYER OR BUSINESS (NOT REQUIRED IF CORPORATE/COMPANY DONOR)
 OCCUPATION (CORPORATE CONTRIBUTION – ENTER TYPE OF BUSINESS)
 PRINCIPAL PLACE OF BUSINESS けるよう DONOR INFORMATION COLUMN 2 00028000 TOTAL THIS PERIOD [ENTER ON LAST PAGE OF SCHEDULE B AND ON LINES 2 AND 7 OF SCHEDULE G.] 11-22302 11/pa/15 64021 | 64021 COLUMN 3 RECEIVED DATE CONTRIBUTION
THIS PERIOD COLUMN 4 AGGREGATE TO DATE COLUMN 5

SUPERSEDES ALL PREVIOUS VERSIONS

REVISED MAY 1, 2014

### SCHEDULE C:

BANK INTEREST, REFUNDED EXPENDITURES AND REBATES

MUST, BE TYPED OR PRINTED LEGIBLY IN 1948

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FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

REPORTING PERIOD: 100 3

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TOTAL THIS PERIOD PAGE OF SCHEDULE C AND N LINE 6 OF SCHEDULE G.]				The second secon	COLUMN 3 DATE RECEIVED
P			The second secon	The second secon	COLUMN 4  PAYMENT  AMOUNT

## SCHEDULE D: EXPENDITURES

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REPORTING PERIOD: (C 23 THROUGH: (1 ) ACC / S

PAGE: \_\_\_\_\_\_\_ OF \_\_\_\_\_

REVISED OCTOBER 1, 2014	REVISED	ONS	Supersedes all previous versions	CFDA-945D
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81.75	(180) 51/2-401	BILL GOOF	Ad	Alexandria Ut 22313
COLUMN 5 AMOUNT PAID	COLUMN 4 DATE OF EXPENDITURE	COLUMN 3  NAME OF PERSON  AUTHORIZING  EXPENDITURE	<u>COLUMN 2</u> ITEM OR SERVICE	COLUMN 1  PERSON OR COMPANY PAID  MAILING ADDRESS OF PAYEE  INCLUDE ZIP

### SCHEDULE E: LOANS

MUST BE TYPED OR PRINTED LEGIBLY IN INK GORF FOR School GORRICH

PAGE \_\_\_\_

REPORTING PERIOD: 1003 THROUGH:

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

PART I: ITEMIZATION OF LOANS RECEIVED

		PARTIAND ON LINE	TOTAL THIS PERIOD [ENTER ON LAST PAGE OF SCHEDULE E, PART I AND ON LINE 14 OF SCHEDULE G]	FILER IS SUBJECT TO PENALTIES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.
COLUMN 5 REMAINING LOAN BALANCE	COLUMN 4 AMOUNT REPAID THIS PERIOD	COLUMN 3 DATE REPAID	COLUMN 2 FULL NAME OF CO-BORROWER, GUARANTOR OR ENDORSER ADDRESS (INCLUDE ZIP CODE)	COLUMN 1  FULL NAME OF LENDER ADDRESS OF LENDER (INCLUDE ZIP CODE)  [LIST IN ALPHABETICAL ORDER]
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<u>COLUMN 5</u> REMAINING LOAN BALANCE	COLUMN 4 AMOUNT OF LOAN THIS PERIOD	COLUMN 3 DATE RECEIVED	COLUMN 2 FULL NAME OF CO-BORROWER, GUARANTOR OR ENDORSER ADDRESS (INCLUDE ZIP CODE)	COLUMN 1  FULL NAME OF LENDER  ADDRESS OF LENDER (INCLUDE ZIP CODE)  [LIST IN ALPHABETICAL ORDER]

DEBTS REMAINING UNPAID AS OF 7 SCHEDULE F:

THIS REPORT	
	REPORTING PERIOD:
PAGE:	10 33 THROUGH:
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FDA-945F	FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.				<u>COLUMN 1</u> FULL NAME OF CREDITOR MAILING ADDRESS OF CREDITOR INCLUDE ZIP
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Davisen Occasion 1 2014			The state of the s		COLUMN 4 AMOUNT REMAINING UNPAID

## SCHEDULE G: STATEMENT OF FUNDS

MUST BE TYPED OR PRINTED LEGIBLY IN INK

FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN.

REPORT PERIOD FROM THROUGH

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE, OR POLITICAL COMMITTEE \*Please Enter Zero on Lines with No Activity

## CONTRIBUTIONS RECEIVED THIS PERIOD

		Number of Contributions	Amount	
junud h	Schedule A [Over \$100]	***		
2.	Schedule B [Over \$100]	- dependence of the second second	\$ 640 B	
'n	Un-itemized cash contributions [\$100 or less] #	#4	\$ 8 8	
4.	Un-itemized In-Kind Contributions [\$100 or less] #	##	Section of the sectio	er en
ÇA	<b>TOTAL</b> [Add Lines 1, 2, 3 & 4]	#		\$7700
BANK	BANK INTEREST, REFUNDED EXPENDITURES AND REBATES	URES AND REBA	ATES	
6	Schedule C [also enter on Line 17b on Schedule H]	sabel funció		
EXPE	EXPENDITURES MADE THIS PERIOD		andy to many to	
7.	Schedule B [From line 2 Above]		s of g	
œ	Un-itemized In-Kind contributions [From line 4 Above]	\bove]	\$	
9.	Schedule D [Expenditures]		\$ 140%, 40	~) ? /
10.	TOTAL [add lines 7, 8 and 9]			6 82 S

RE	RECONCILIATION OF LOAN ACCOUNT	
=	11. Beginning loan balance [from Line 15 of last report]	September of the septem
12.	12. Loans received this period [from Schedule E - Part I]	S The state of the
13.	13. SUBTOTAL [Add Lines 11 and 12]	\$
7.	14. Subtract: Loans repaid this period [from Schedule E - Part II]	(\$)
15.	15. Ending loan balance [subtract Line 14 from Line 13]	\$

### 29 ENDING BALLONCE 28. Total Disbursements this Election Cycle[Add lines 26 and 27] 27. 25 24 23 20 26 Committee's Receipts and Disbursements – Election Cycle Totals 19 MUST BE TYPED OR PRINTED LEGIBLY IN INK FILER IS SUBJECT TO FINES IF ALL INFORMATION REQUIRED ON THIS FORM IS NOT GIVEN. Š 17 FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE, OR POLITICAL COMMITTEE \*Please Enter Zero On Lines with No Activity REPORT PERIOD FROM SCHEDULE H: SUMMARY OF RECEIPTS AND DISBURSEMENTS Beginning Balance [Line 19 of last report] Disbursements for Current Reporting Period: Receipts for Current Reporting Period: Disbursements from Current Reporting Period [Line 18d above] Previous Disbursements [Line 28 from last report] (ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE) Total Funds Available [Add lines 21 and 24] Receipts from Current Reporting Period [Line 17d above] Previous Receipts [Line 24 from last report] (ENTER ZERO IF FIRST REPORT OF ELECTION CYCLE) Balance at Start of Election Cycle Total Unpaid Debts [from Schedule F of this report] Ending Balance [Subtract Line 18d from Line 17e] MUST MATCH LINE 29) d. Total Payments Made [Add lines 18a,18b, and 18c] c. Other surplus funds paid out [from Schedule I] b. Loans repaid this reporting period [Line 14 of Schedule G] Total Receipts this Election Cycle [Add lines 22 and 23] a. Contributions received this period [Line 5 of Schedule G] Expenditures made this reporting period [Line 10 of Schedule G] **Subtotal**: Contributions and Receipts received this period [Add Lines 17a, 17b and 17c above] Loans received this period [Line 12 of Schedule G] Bank interest, refunded expenditures and rebates [Line 6 of Schedule G] \$. Total Expendable Funds [Add Lines 16 and 17d] THROUGH Stats \$ 770,31

# SCHEDULE I: FINAL SURPLUS FUNDS PAID OUT

MUST BE TYPED OR PRINTED LEGIBLY IN INK
USE THIS SCHEDULE ONLY WHEN FILING A FINAL

REPORTING PERIOD: (C/2-5 THROUGH: 1/1/2-6/15)
PAGE OF

FULL NAME OF CANDIDATE, CANDIDATE'S COMMITTEE OR POLITICAL COMMITTEE

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RMALION REQUIRED ON THIS FORM IS N				<u>COLUMN 2</u> MAILING ADDRESS OF PAYEE INCLUDE ZIP
OT GIVEN.				COLUMN.3 Type of disposition
TOTAL THIS PERIOD [ENTER ON LAST PAGE OF SCHEDULE I AND ON LINE 18D OF SCHEDULE H.]				COLUMN 4 NAME OF PERSON AUTHORIZING EXPENDITURE
TOTAL THIS PERIOD  LAST PAGE OF SCHEDULE I AND ON LINE 18D OF SCHEDULE H.]				COLUMN 5  DATE OF  EXPENDITURE
A A				<u>COLUMN 6</u> AMOUNT PAID